FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549
FORM D

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OMB APPROVAL

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SEP 1 1 2008

Washington, DC

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

	SE	C USE ONI	Y
Prefix		·	Serial
	DA	TE RECEIV	ED

Name of Offering (check if this is an ar Q-BLK Co-Investment Fund II, L.P C		s changed, and indi	cate chang	ge.)		
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	☑ Ru	le 506	☐ Section 4(6)	□ ULOE
Type of Filing: ☑ New Filing	g	••				
	A. BASIC II	DENTIFICATI	ON DAT	ΓΑ		I JENN BEKEL ENNE KRUELKENNE ENNE KEN LEEL
1. Enter the information requested about th	e issuer					
Name of Issuer (☐ check if this is an amend Q-BLK Co-Investment Fund II, L.P. – C		anged, and indicate	change.)			08059869
Address of Executive Offices 601 Union Street, 56 th Floor, Seattle, WA	(Number and Street 98101	, City, State, Zip Co	ode.)	Telephone N (206) 613-67	umber (menuang 700	/ Nou woul,
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street	, City, State, Zip Co	ode)	Telephone N	umber (Including	Area Code)
Brief Description of Business			•		PR	OCESSED
Private Investment Fund						OCE39ED
	limited partnership, alro limited partnership, to			□ other (ple		EP 172008
Actual or Estimated Date of Incorporation of	or Organization:	Month Year 6 0 7] ☑ A		Estimated	ISON REUTERS
Jurisdiction of Incorporation or Organizatio	•	er U.S. Postal Servi ; FN for other forei				E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

 Each general and managing 	partner of partners	ship issuers.				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Ø	General and/or Managing Partner
Full Name (Last name first, if ind BAA Co-Investment Fund II (G						
Business or Residence Address 601 Union Street, 56 th Floor, Se		treet, City, State, Zip Cod n 98101	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	٥	General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)	-		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	c)			-
	(Use blank shee	t, or copy and use addition	nal copies of this sheet, as	necessary.)		

			****	B. IN	FORMAT	TION AB	OUT OF	ERING				•
1. Has	the issuer so	old, or does	the issuer in				stors in this n 2, if filing				Yes ☑	No □
2. Wha	at is the mini	mum invest	ment that w	ill be accep	ted from any	, inđividual	?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				<u>*000,000</u>
4. Ente	es the offeringer the information or serson to be lies, list the r	nation required imilar remunities an area.	ested for ea neration for ssociated pe	ich person solicitation rson or age	who has be of purchase nt of a brok	een or will ers in conno er or dealer	be paid or ection with s registered v	given, dire ales of secu with the SE	ectly or ind irities in the C and/or wi	offering. If th a state or	*unles: Yes ☑	s waived No □
	ker or dealer											
Full Na	me (Last nar	ne first, if ir	idividual)								•	
Not ap	plicable										.	
Busines	s or Residen	ce Address	(Numbe	er and Stree	t, City, State	e, Zip Code)					
Name o	f Associated	Broker or I	Dealer									
States in	n Which Per	son Listed F	las Solicited	l or Intends	to Solicit Pu	ırchasers						
(Che	ck "All State	s" or check	individual S	States)	***************************************						🗅	All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] ISC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	(CO) (LA) [NM] (UT)	[CT] [ME] [NY] [VT]	(DE) [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Na	me (Last nar	ne first, if ir	dividual)									
Busines	s or Residen	ce Address	(Numbe	er and Stree	t, City, State	e, Zip Code)					
Name o	f Associated	Broker or I	Dealer			<u>. </u>						
States i	n Which Per	son Listed H	las Solicited	or Intends	to Solicit Pu	ırchasers		 				
(Che	ck "All State	s" or check	individual S	States)								All States
[AL] [IL] [MT] [RI] Full Na	[AK] [IN] [NE] [SC] me (Last nar	[AZ] [IA] [NV] [SD] ne first, if ir	[AR] [KS] [NH] [TN] ndividual)	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	(CT) (ME) (NY) (VT)	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Busines	s or Resider	ce Address	(Numbe	er and Stree	t, City, State	e, Zip Code)					
Name o	f Associated	Broker or I	Dealer							<u>_</u>		
States in	n Which Per	son Listed F	las Solicited	or Intends	to Solicit Pu	ırchasers					;	
	ck "All State											All States
[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]

[TN] [TX] [UT] [VT] [VA] [WA] [WV]
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price	Αn	nount Already Sold
	Debt	\$_	0	\$	
	Equity			\$	
	□ Common □ Preferred		_		
	Convertible Securities (including warrants)	\$	0	\$	C
	Partnership Interests			\$	0
	Other (Specify) LP Interests			\$	25,000,000
	Total			\$	25,000,000
2	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this				
- ·	offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors	C	Aggregate ollar Amount of Purchases
	Accredited Investors			\$	25,000,000
	Non-accredited Investors	_			0
	Total (for filings under Rule 504 only)	_	N/A_)	<u>N/A</u>
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
			Type of	D	ollar Amount
	Type of Offering		Security	_	Sold
	Rule 505			\$_	0
	Regulation A			-	0
	Rule 504	_	N/A .	\$_	0
	Total	_	N/A	\$_	0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fces		\square	\$	125,000
	Accounting Fees		\Bar{\Bar{\Bar{\Bar{\Bar{\Bar{\Bar{	\$	25,000
	Engineering Fees		_ D	s —	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			<u> </u>	0
	Total		- ⊠	S _	150,000
	1 Vidi				

Question I and total expenses furnished in r	offering price given in response to Part C - esponse to Part C - question 4.a. This the issuer."			\$ <u>399</u>	<u>,850,000</u>
5. Indicate below the amount of the adjusted gross pro for each of the purposes shown. If the amount for an check the box to the left of the estimate. The total gross proceeds to the issuer set forth in response to P	y purpose is not known, furnish an estimate and of the payments listed must equal the adjusted				
		Payme Officers, & Aff		Paymer Othe	
Salaries and Fees		□ \$	0	□ \$	0_
Purchase of real estate		□ \$	0	□ \$	0_
Purchase, rental or leasing and installation of machi	nery and equipment	□ \$	0	□ \$	0
Construction or leasing of plant buildings and facili	□ \$	0	□ \$	0	
Acquisition of other businesses (including the value be used in exchange for the assets or securities of an			0	□ \$	0
Repayment of indebtedness		. 🗅 \$	0	□ \$.0
Working capital	•••••	D \$	0_	□ \$	0
Other (specify) Investments		□ \$	0	☑ \$ <u>399,</u> 8	350,000
Column Totals	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 🗆 \$	0_	☑ \$ <u>399,</u> 8	350,000
Total Payments Listed (column totals added)			Ø \$ <u>399</u>	<u>850,000</u>	
	D. FEDERAL SIGNATURE			· · ·	
signature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accredited Issuer (Print or Type) Q-BLK Co-Investment Fund II, L.P. on behalf of CRT Series			Date 9-		i, the
CKI Belles				•	
Name of Signer (Driet on Tune)	The of Signar (Print or Type)	la la			
Name of Signer (Print or Type) By: BAA Co-Investment Fund II (GenPar), LLC, in its capacity as general partner By: BlackRock Alternative Advisors GP Holdings, LLC, its sole member By: BlackRock Financial Management, Inc. its managing member	Title of Signer (Print or Type) General Partner				
By: BAA Co-Investment Fund II (GenPar), LLC, in its capacity as general partner By: BlackRock Alternative Advisors GP Holdings, LLC, its sole member By: BlackRock Financial					
By: BAA Co-Investment Fund II (GenPar), LLC, in its capacity as general partner By: BlackRock Alternative Advisors GP Holdings, LLC, its sole member By: BlackRock Financial Management, Inc. its managing member	General Partner	Manageme	nt, Inc.		
By: BAA Co-Investment Fund II (GenPar), LLC, in its capacity as general partner By: BlackRock Alternative Advisors GP Holdings, LLC, its sole member By: BlackRock Financial Management, Inc. its managing member Name of Signer (Print or Type)	General Partner Title of Signer (Print or Type)	Manageme	nt, Inc.		

